



Application for General Permit to
Discharge Stormwater Associated with
Industrial Activity

☐ Change of Information
Permit No. SO3-00 _____

Please print clearly in ink or type and read instructions before filling out this form.

I. Permittee Information

Operator/Representative for the Facility

(All permit correspondence will be mailed here**)

Billing Address

(All billing correspondence will be mailed here*)

| | | | |
|---|----------------------------------|---|----------------------------------|
| Operator/Representative's Name Mark Lucas | | Universal Business Identifier (UBI) number | |
| Title Project Manager | Phone No. 206-684-1248 | Billing Contact Name Mark Lucas | Phone No. 206-684-1248 |
| Company Name King County | | Company Name King County | |
| **Street Address or P.O. Box KSC-NR-512 201 South Jackson | | *Billing Address KSC-NR-512 201 South Jackson | |
| City Seattle | State WA | City Seattle | State WA |
| Zip + 4 98104-3855 | | Zip + 4 98104-3855 | |

II. Facility Information

| | | | | | | | | | | | | | | | | | | | |
|--|--------------------|--|-----------------------|---|---|---|---|--|--|--|--|--|--|--|--|--|--|--|--|
| Date facility began operation or will begin operation. 1950 or Earlier | | | | | | | | | | | | | | | | | | | |
| Name of Facility Georgetown Yard | | Facility Contact Name Mark Lucas | | | | | | | | | | | | | | | | | |
| | | Phone No. 206-684-1248 | | | | | | | | | | | | | | | | | |
| Facility Street Address (or Location Description) 6640 Ellis Ave | | | | | | | | | | | | | | | | | | | |
| City Seattle | State WA | Zip + 4 | County King | | | | | | | | | | | | | | | | |
| A. List the Primary Standard Industrial Classification Code for your facility in No. 1. 1. <table border="1"><tr><td>4</td><td>2</td><td>3</td><td>1</td></tr></table> 2. <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> 3. <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> 4. <table border="1"><tr><td></td><td></td><td></td><td></td></tr></table> | | | | 4 | 2 | 3 | 1 | | | | | | | | | | | | |
| 4 | 2 | 3 | 1 | | | | | | | | | | | | | | | | |
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| B. Type or Nature of Business: <u>Freight Trucking Terminal</u> | | | | | | | | | | | | | | | | | | | |
| C. Total size of site with industrial activity in acres: (Divide square feet by 43,560 to get acres) <u>1.6</u> | | | | | | | | | | | | | | | | | | | |

III. Receiving Water Information.

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|---|
| 1. Site Map: Prepare a map with the following information and attach it to this form (see permit Special Condition S9.B.1.b.) <ul style="list-style-type: none">• Drainage and discharge structures (name each discharge point).• An outline of the stormwater drainage areas for each stormwater discharge point.• Areas where stormwater discharges to the ground.• Paved areas.• Sample location.• All buildings.• Areas of pollutant contact (actual or potential).• Surface water locations (include wetlands, drainage ditches, and sloughs).• Areas of existing and potential soil erosion.• Vehicle service areas. |
| 2. Discharge Identifier: List the name, number, or letter, used on the map to identify the point(s) of discharge. (Please list <u>all</u> points of discharge) This ID can only be a maximum of four characters long and must be unique for each point of discharge. <u>Storm water Drain # 1540</u> |

3. If you have identified more than one point of discharge (listed in #2 above), which point(s) of discharge do you expect to take stormwater samples from in order to comply with the permit sampling requirement?

4. **Latitude/Longitude of the point(s) of discharge:** This is the geographical location of the point where stormwater is discharged from your facility expressed in latitude/longitude in degrees (°), minutes ('), and seconds ("). Please see instructions for more details.

Latitude: 47 ° 32 ' 36 " Longitude: 122 ° 19 ' 1 "

5. **Name of Receiving Water:** Provide the name of the receiving water body where stormwater discharges from your site enter. (e.g. Mill Creek, Elliot Bay, Chehalis River)

6. **Latitude/Longitude of the Receiving Water:** This is the geographical location of the point where discharge from your facility enters the receiving water listed above expressed in latitude/longitude in degrees (°), minutes ('), and seconds ("). (It may be the same as number 3 above). Please see instructions for more details.

Latitude: 42 ° 32 ' 35 " Longitude: 122 ° 19 ' 59 "

7. **Name of Conveyance System:** if you discharge to a municipal stormwater system or other stormwater conveyance system (e.g. Kent stormwater drainage system, roadside ditch). Identify the system by name or if unnamed, by other identifier (e.g. 145th street ditch)

Seattle Storm water Collection Pipe

IV. Request for Mixing Zone

- ☐ I am requesting a mixing zone as provided for under WAC 173-201A-100(10) consistent with the provisions in the industrial stormwater general permit, Special Condition S3.F. In order to obtain a mixing zone I am providing sufficient information for Ecology to determine that I have implemented all known, available, and reasonable methods of treatment (AKART), the proposed mixing zone will not interfere with the beneficial uses of the receiving water, and will not create a barrier to the migration or translocation of indigenous organisms to a degree that might cause damage to the ecosystem. In support of this I am including the following documentation:

- A map clearly identifying all waters included in the mixing zone;
- All known discharges within the requested area for the mixing zone, their location and the source of the discharge;
- A description of the historic and current uses of all waters in the mixing zone including the typical plant and animal species inhabiting the waters and public uses of the waters; and
- Characterization of the stormwater discharge consistent with the EPA Form 3510-2F (Form 2F), and a characterization of the receiving water (i.e. pollutant levels of the receiving waters).

V. Stormwater Pollution Prevention Plan (SWPPP)

Has a stormwater pollution prevention plan been developed? ☒ Yes ☐ No

If No, Ecology must be notified by letter when the SWPPP has been developed and implemented. Facilities will not receive permit coverage until a SWPPP has been developed, implemented and Ecology notified. New facilities must submit SWPPP to Ecology before receiving permit coverage.

VI. Industrial Areas and Activity Information

Areas with industrial activities at facility. Check all that apply.

- | | |
|---|---|
| <input type="checkbox"/> Access Roads & Rail Lines for Shipping & Receiving | <input type="checkbox"/> Material Handling to Produce Product |
| <input type="checkbox"/> Air Emissions from Roof or Sides of Buildings | <input type="checkbox"/> Material Handling – Finished Product |
| <input type="checkbox"/> Application or Disposal of Wastewaters | <input type="checkbox"/> Parking Lots Used for Loading/Unloading |
| <input type="checkbox"/> Bag House Area | <input type="checkbox"/> Recycling Area |
| <input type="checkbox"/> Bulk Storage Tank Areas | <input checked="" type="checkbox"/> Staging Area for Heavy Equipment |
| <input type="checkbox"/> Conveyors Located Outside | <input type="checkbox"/> Storage & Maintenance of Material Handling Equipment |

- | | |
|---|---|
| <input type="checkbox"/> Dismantling of Equipment (Vehicles and/or Machinery) | <input checked="" type="checkbox"/> Vehicle Maintenance |
| <input type="checkbox"/> Fueling Station | <input type="checkbox"/> Vehicle Wash Area |
| <input type="checkbox"/> Fueling – Mobile | <input type="checkbox"/> Waste Treatment, Storage, Disposal |
| <input type="checkbox"/> Hazardous Waste Treatment, Storage, or Disposal (Refers to RCRA, Subtitle C Facilities Only) | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Manufacturing Building | <input type="checkbox"/> Other: _____ |

VII. Material Handling

A. Types of materials handled and/or stored outdoors. Check all that apply.

- | | | |
|---|---|--|
| <input type="checkbox"/> Acids or Alkalies | <input type="checkbox"/> Logs | <input type="checkbox"/> Sand or Gravel |
| <input type="checkbox"/> Antifreeze | <input type="checkbox"/> Metals | <input checked="" type="checkbox"/> Scrap Metal |
| <input type="checkbox"/> Compost | <input type="checkbox"/> > Iron _____ | <input type="checkbox"/> Solvents |
| <input type="checkbox"/> Deicers | <input type="checkbox"/> > Steel _____ | <input type="checkbox"/> Stockpiled Materials |
| <input type="checkbox"/> Detergents | <input type="checkbox"/> > Other _____ | <input type="checkbox"/> Transformers |
| <input type="checkbox"/> Drums | <input type="checkbox"/> Organics | <input type="checkbox"/> Waste Piles |
| <input type="checkbox"/> > Steel _____ | <input type="checkbox"/> Paints/Coatings | <input type="checkbox"/> Wood Chips, Sawdust, Bark |
| <input type="checkbox"/> > Plastic _____ | <input type="checkbox"/> Petroleum or Petrochemical Product | <input type="checkbox"/> Wood Treating Products |
| <input type="checkbox"/> Equipment (engines, machine parts, etc.) | <input type="checkbox"/> Pesticides | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Forklifts | <input type="checkbox"/> Plastic Pellets | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Hazardous Wastes | <input type="checkbox"/> Plating Products | <input type="checkbox"/> Other: _____ |
| <input type="checkbox"/> Herbicides | <input type="checkbox"/> Powders | |

B. Identify existing management practices employed to reduce pollutants in industrial stormwater discharges. Check all that apply.

- | | | |
|---|---|--|
| <input type="checkbox"/> Automatic Shutoff Control Valve System (Spill Control) | <input checked="" type="checkbox"/> Dispose of Waste Materials Properly | <input checked="" type="checkbox"/> Procedures for Maintenance and of Deteriorating Equipment Repair/Replacement |
| <input checked="" type="checkbox"/> Berms/Dikes | <input type="checkbox"/> Double-Walled Storage Tanks | |
| <input type="checkbox"/> Catch Basins Cleaned Regularly | <input type="checkbox"/> Drain Dumpsters to Sanitary Sewer | |
| <input type="checkbox"/> Chemical Treatment for Erosion Control | <input type="checkbox"/> Drip Pans | <input checked="" type="checkbox"/> Recycling/Source Reduction |
| <input type="checkbox"/> Comply with Uniform Fire Codes | <input type="checkbox"/> Elevate Materials Stored Outside | <input type="checkbox"/> Slope Impervious Areas to Sanitary Sewer (Particularly Loading/Unloading Area) |
| <input type="checkbox"/> Containment | <input type="checkbox"/> Infiltration Basins | |
| <input checked="" type="checkbox"/> Covered Dumpsters | <input type="checkbox"/> Inspection Storm Drains for Illicit Discharge | <input type="checkbox"/> Spill Prevention Plan |
| <input type="checkbox"/> Covered Loading/Unloading Areas | <input checked="" type="checkbox"/> Label Containers | <input type="checkbox"/> Stencil Storm Drains "No Dumping" |
| <input type="checkbox"/> Curbing | <input type="checkbox"/> Limit Use of Toxic/ Hazardous Chemicals | <input type="checkbox"/> Storm Drain Plugs and/or Cover Kits |
| <input type="checkbox"/> Daily Checks for Leaks/Spills | <input type="checkbox"/> Maintain Ditches/Culverts | <input type="checkbox"/> Surface Leachate Collection |
| <input type="checkbox"/> Dead End Sumps | <input checked="" type="checkbox"/> Maintenance Records Kept Current | <input checked="" type="checkbox"/> Sweep and Clear Site of Debris |
| <input type="checkbox"/> Detention Facilities | <input checked="" type="checkbox"/> Oil/Water Separator | <input type="checkbox"/> Train Employees on Pollution Prevention |
| <input checked="" type="checkbox"/> Dispose of Debris from Catch Basin Properly | <input type="checkbox"/> Overhead Coverage | <input type="checkbox"/> Vegetation Management |
| | | <input type="checkbox"/> Wetland Detention Pond |

VIII. Regulatory Status. Check all that apply.

- | |
|--|
| <input type="checkbox"/> NPDES Permit (Individual or General Construction Stormwater) Permit No. _____ |
| <input type="checkbox"/> State Waste Discharge Permit (Ground Discharges) Permit No. _____ |
| <input type="checkbox"/> Air Notice of Construction, Permit, or Order Agency: _____ |
| <input type="checkbox"/> State/USEPA Hazardous Waste ID No. _____ |
| <input type="checkbox"/> Drywell (Ecology) Registration No: _____ |

IX. State Environmental Policy Act (SEPA). Applies only to new or newly established facilities.

Has a SEPA review been completed? ☐ Yes ☐ No ☐ Exempt

Type of SEPA document: ☐ DNS ☐ Final EIS

Agency issuing DNS, Final EIS, or Exemption: _____ Date: _____

X. Public Notice.

This application must be received by Ecology on or before the date of the first public notice. See application instructions.

Date of the first public notice: 06 / 10 / 2008

Date of second public notice: 06 / 17 / 2008

Name of the newspaper that will publish the public notices: Seattle Times

PUBLIC NOTICE

King County Department of Natural Resources (Name of owner, or name of owner % engineering firm, architect, etc.)

201 South Jackson (Address of owner or % Representative) is seeking coverage. The **1.6** (Total acres) industrial site, known as

Georgetown Yard (Project name) is located at **6640 Ellis Ave** (Street address) in **Seattle** (Name of nearest city). Operations are due to startup on/**started** on (select one) **approximately 1950** (Date). Industrial activities include **Truck Staging / Maintenance**

(Briefly clarify the industrial activity). Stormwater will be **collected via an on site storm drain system**

(Brief description of how the stormwater will be managed), prior to discharging to **the Duwamish River**.

(Clarify the direction of the stormwater flows; list wetlands, unnamed and named receiving waters; storm drains and name of receiving water for storm drains; clarify if buffers will be used to protect sensitive waterbodies).

Any person desiring to present their views to the Department of Ecology concerning this application, may notify Ecology in writing within 30 days from the last date of publication of this notice. Comments may be submitted to:

Washington Dept of Ecology
Water Quality Program – Industrial Stormwater Unit
PO Box 47696
Olympia, WA 98504-7696

XI. Certification of Permittee(s)

"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations."

Operator/Representative's Printed Name

(If Co-Permittee) Co-Permittee's Printed Name

Operator/Representative's Signature

Co-Permittee's Signature

WTD, Division Director

Title

Title

June 6, 2008

Date

Date

Please sign and return this document to the following address:

Washington Department of Ecology
Water Quality Program – Industrial Stormwater
PO Box 47696
Olympia, WA 98504-7696

If you have any questions, please call:

- 360-407-7451 Josh Klimek for city of *Seattle* or counties: *Kitsap, Pierce, Thurston*
- 360-407-7229 Elaine Worthen for counties: *Island, King (except Seattle), San Juan*
- 360-407-6437 Carrol Johnston for counties: *Adams, Asotin, Columbia, Ferry, Franklin, Garfield, Grant, Lincoln, Pend Oreille, Skagit, Snohomish, Spokane, Stevens, Walla Walla, Whatcom, Whitman.*
- 360-407-6858 Joyce Smith for counties: *Benton, Chelan, Clallam, Clark, Cowlitz, Douglas, Grays Harbor, Jefferson, Kittitas, Klickitat, Lewis, Mason, Okanogan, Pacific, Skamania, Wahkiakum, Yakima.*

If you need this document in an alternate format, please contact the Water Quality Program at 360-407-6401. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.